

*This portion MUST be returned with your payment to ensure proper credit. THANK YOU* ✓

|                              |  |
|------------------------------|--|
| ACCOUNT BILLED               |  |
| CHIEF CONSOLIDATED MINING CO |  |

|               |  |
|---------------|--|
| PROJECT NAME  |  |
| CHIEF #2 MINE |  |

|            |
|------------|
| PROJECT ID |
| S230040    |

|            |            |            |
|------------|------------|------------|
| DUE DATE   | ANNUAL FEE | AMOUNT DUE |
| 07/27/2001 | \$ 100     | \$ 100     |

|                             |
|-----------------------------|
| TAX ID OR SOCIAL SECURITY # |
|                             |

|  |
|--|
| <input type="checkbox"/> FEE NOT ENCLOSED                        |
| Permittee requests<br>an inspection to close<br>out this permit. |

DIVISION OF OIL GAS AND MINING  
1594 WEST NORTH TEMPLE SUITE 1210  
PO BOX 145801  
SALT LAKE CITY UT 84114-5801

|                          |     |
|--------------------------|-----|
| <i>Change of Address</i> |     |
| Contact                  |     |
| Address                  |     |
|                          |     |
|                          |     |
| State                    | Zip |
| Phone                    |     |

*Please make check payable to:*  
**Division of Oil, Gas and Mining**